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## APPLICANTS

David Mitchell, Darra, AUSTRALIA;

*mm*

## \*\* CONTINUING DATA \*\*\*\*\*

*mm*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*mm*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 02/25/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
	<i>mm</i> Examiner's Signature	AUSTRALIA	4	15	1
	<i>mm</i> Initials				

## ADDRESS

23117

NIXON &amp; VANDERHYE, PC

1100 N GLEBE ROAD

8TH FLOOR

ARLINGTON, VA

22201-4714

## TITLE

Filling apparatus

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
RECEIVED	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees ( Filing )
385	No. _____ for following:	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
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